



PTO/SB/21 (modified)

Approved for use through xx/xx/xx, OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0001/PTO Rev. 10/95	U.S. Department of Commerce Patent and Trademark Office	Application Number	09/144,313	
		Filing Date	August 31, 1998	
		First Named Inventor	Jay L. Gainsboro et al.	
		Group Art Unit Number	2645	
		Examiner Name	Gerald Gauthier	
Total Number of Pages in This Submission		9*	Attorney Docket Number	18279-05700

TRANSMITTAL FORM

(to be used for all correspondence during pendency of filed application)

RECEIVED

ENCLOSURES (check all that apply)

JUL 01 2002

<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input checked="" type="checkbox"/> Check Enclosed <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input checked="" type="checkbox"/> Information Disclosure Statement & PTO-1449 <input checked="" type="checkbox"/> Copies of 78 IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input type="checkbox"/> Amendment/Response: [] Page(s) <input type="checkbox"/> After Final <input type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) [] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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Technology Center 2600

REMARKS:

*references not included in page count

SIGNATURE OF ATTORNEY OR AGENT

Signature:			
Attorney/Reg. No.:	Thomas L. Ewing, Reg. No. 34,328	Dated:	June 21 2002

CERTIFICATE OF MAILING

I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.

Signature:			
Typed or Printed Name:	Thomas L. Ewing	Dated:	June 21 2002
Express Mail Mailing Number (optional):			

PTO/SB/17 (10-01)(modified)
OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0002/PTO(modified) U.S. Department of Commerce
Rev. 10/2001 Patent and Trademark Office**FEE TRANSMITTAL****TOTAL AMOUNT OF PAYMENT**Subtotal (1) + Subtotal (2) + Subtotal (3) = **(\$ 180)****Complete if Known**

Application Number	09/144,313
Filing Date	August 31, 1998
First Named Inventor	Jay L. Gainsboro et al.
Group Art Unit	2645
Examiner Name	Gerald Gauthier
Attorney Docket Number	18279-05700

METHOD OF PAYMENT**1. The Commissioner is hereby authorized to:**

- ☐ Charge the indicated fees to the below mentioned deposit account.
- ☒ Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account.†
- ☐ Applicant claims small entity status
See 37 CFR 1.27

Deposit Account Number: 19-2555

Deposit Account Name: FENWICK & WEST LLP

A Duplicate Copy of this authorization is attached

2. ☒ Payment Enclosed:☒ Check ☐ Credit Card ☐ Other**FEE CALCULATION (fees effective 10/01/2001)****1. FILING FEE**

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
101/\$740	201/\$370	Utility Filing	
106/\$330	206/\$165	Design Filing	
108/\$740	208/\$370	Reissue	
114/\$160	214/\$80	Provisional Filing	

SUBTOTAL (1) **(\$ 0)****2. CLAIMS**

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description
103/\$18	203/\$9	Claims in excess of 20
102/\$84	202/\$42	Independent claims in excess of 3
104/\$280	204/\$140	Multiple dependent claim
109/\$84	209/\$42	Reissue independent claims over original patent
110/\$18	210/\$9	Reissue claims in excess of 20 and over original patent

3. ADDITIONAL FEES

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
105/\$130	205/\$65	Surcharge - late filing fee or oath	
127/\$50	227/\$25	Surcharge-late provisional filing fee or cover sheet	
147/\$2,520	147/\$2,520	For filing a request for reexamination	
115/\$110	215/\$55	Extension for response within first month†	
116/\$400	216/\$200	Extension for response within second month†	
117/\$920	217/\$460	Extension for response within third month†	
118/\$1,440	218/\$720	Extension for response within fourth month†	
128/\$1,960	228/\$980	Extension for response within fifth month†	
119/\$320	219/\$160	Notice of Appeal	
141/\$1,280	241/\$640	Petition to revive unintentionally abandoned application	
142/\$1,280	242/\$640	Utility Issue Fee (Or Reissue)	
143/\$460	243/\$230	Design Issue Fee	
122/\$130	122/\$130	Petitions to the Commissioner	
126/\$180	126/\$180	Submission of Information Disclosure Statement	180
179/\$740	279/\$370	Request for Continued Examination (RCE)	
581/\$40	581/\$40	Recording each patent assignment per property (times number of properties)	
146/\$740	246/\$370	Filing a submission after final rejection (37 CFR 1.129(a))	
149/\$740	249/\$370	For each additional invention to be examined (37 CFR 1.129(b))	

Other fee (specify):

Other fee (specify):

SUBTOTAL (3) **(\$ 180)**

(Col. 1)		(Col. 2)		(Col. 3)		Fee	Fee Due
For	No. of Existing Claims	minus*	Highest No. Previously Paid For	=	Extra**		
TOTAL		minus*	20 or 0	=	x		
INDEP		minus*	3 or 0	=	x		
[] First presentation of multiple dependent claim							

* Subtract the greater number of Col. 2

** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

SUBTOTAL (2) **(\$ 0)****SUBMITTED BY**Typed or Printed Name **Thomas L. Ewing**

Signature

Complete (if applicable)Reg. Number **34,328**Date **June 2002**

† Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby